KENTUCKY LEGISLATIVE ETHICS COMMISSIO

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STATEMENT OF FINANCIAL DISCLOSURE (KRS 6.787

To be filed by: All members of the General Assembly, all candidates and nominees for election to the
General Assembly, and major management personnel in the legislative branch of state government.
☐ Check here and attach additional sheets if necessary Number of sheets attached.
Please Include The Following Information For The Preceding Calendar Year:
Name DENNIS HORLANDER
Business address 1806 FARNSLEY ROAD, STE 6, LOUISVILLE, KY 40216
Business telephone (502) 447-2498
Home address 3500 DIXIE HIGHWAY, LOUISVILLE, KY 40216
Title of public position, or office sought STATE REPRESENTATIVE
Other occupations of filer MANUFACTURERES REP.
Occupations of spouse DECEASED
NOTE: The Following Sections Do Not Require Disclosure Of Specific Dollar Amounts.
Positions held by filer in any business, partnership, corporation for profit, or corporation not for profit from which the filer receives compensation, and the name of the business, partnership, or corporation N/A
Positions held by filer's spouse in any business, partnership, corporation for profit, or corporation not for profit from which the filer receives compensation, and the name of the business, partnership, or corporation N/A
Names and addresses of all businesses, investments, or securities in which the filer, filer's spouse, or filer's minor children had at any time during the reporting year an interest of \$10,000 at fair market value, or 5% ownership interest or more
HORLANDER - KELLER COMPANY
JEDCO ASSOCIATES
HACO ASSOCIATES

ces and form of gross income of the filer (list sources by name) ORLANDER & ASSOCIATES EDCO ASSOCIATES/RENTAL INCOME ENERAL INSURANCE UNDERWRITERS EGISLATIVE PAY ONUMENTAL INSURANCE CODELL CONSTRUCTION CO. ces and form of gross income of the filer's spouse (list sources by name) /A tions of a fiduciary nature in a business /A cesignation as commercial, residential, or rural, and the location of all real property
EDCO ASSOCIATES/RENTAL INCOME ENERAL INSURANCE UNDERWRITERS EGISLATIVE PAY ONUMENTAL INSURANCE CODELL CONSTRUCTION CO. ces and form of gross income of the filer's spouse (list sources by name) /A tions of a fiduciary nature in a business /A
EGISLATIVE PAY ONUMENTAL INSURANCE CODELL CONSTRUCTION CO. ces and form of gross income of the filer's spouse (list sources by name) /A tions of a fiduciary nature in a business /A
COMMENTAL INSURANCE CODELL CONSTRUCTION CO. ces and form of gross income of the filer's spouse (list sources by name) /A tions of a fiduciary nature in a business /A
CONUMENTAL INSURANCE CODELL CONSTRUCTION CO. ces and form of gross income of the filer's spouse (list sources by name) /A tions of a fiduciary nature in a business /A
ces and form of gross income of the filer's spouse (list sources by name) /A tions of a fiduciary nature in a business /A
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tions of a fiduciary nature in a business /A
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by the filer, filer's spouse, or filer's minor children ALL IN JEFFERSON COUNTY, K 713 SANDERS LANE, 1715 SANDERS LANE RESIDENTIAL LOU., KY 500 DIXIE HIGHWAY COMMERCIAL
500 DIXIE HIGHWAY COMMERCIAL " 502 DIXIE HIGHWAY COMMERCIAL "
504 DIXIE HIGHWAY COMMERCIAL "
800 - 1806 FARNSLEY ROAD COMMERCIAL "
COMPACIAL
rces of gifts of money or property with a retail value of more than \$200 to the filer or
filer's immediate family, except those from a member of the filer's family. (Family
ns spouse, parent, sibling, child, mother-in-law, father-in-law, son-in-law, daughter-
aw, grandparent, or grandchild. Immediate family means unemancipated child
ding in an individual's household, spouse, or a person claimed by the filer's spouse as
pendent for tax purposes.)
N/A
V/A
V/A
V/A
I/A
V/A

The name of any creditor owed more than \$10,000 except debts arising from the purchase of consumer goods. (Goods used or bought for use primarily for personal, family, or household purposes) US BANK BUSINESS LINE OF CREDIT

FIFTH THIRD BANK

ADVANTA BUSINESS LINE OF CREDIT

FIFTH THIRD BANK	ADVANTA BUSINESS LINE OF CREDIT
CHASE BUSINESS LINE OF CREDIT	MBNA
RIVER CITY BANK	DISCOVER
WEST POINT BANK	KING SOUTHERN BANK
AMERICAN EXPRESS BUSINESS LINE OF	CREDIT

The name of any legislative agent who is:

- 1. A member of the filer's immediate family;
- 2. A partner of the filer, or a partner of a member of the filer's immediate family;
- 3. An officer or director of the filer's employer;
- 4. An employer of the filer or an employer of a member of the filer's immediate family;
- 5. A business associate of the filer or a business associate of a member of the filer's immediate family

N/A	filer's immediate family
The nam	es of any of the filer's clients who are legislative agents or employers
partner o	ave held a professional license during the filing period, has a properly licensed of yours engaged in the practice of cases or other matters which you are ed from practicing under KRS 6.744? Yes No Not Applicable

If yes, list the names of the clients represented and list the agencies before which the partner made an appearance. The filer need not identify which client was represented before a specific agency.

Clients				
N/A	4			
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State Agency				
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N/A		***************************************		
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 Upon receipt by the record available for confidence. Any person who far a deficiency identified to exceed \$100 per day. 	ils to file a statement by the Commission	t of financial di	sclosure or who	folla to have a fac
3. Any person who fil false information, or to misdemeanor. 01/10/09	es a statement of fine omit required infor	ancial interests mation, shall be	which they know guilty of a class	w to contain s A
Date	Piler	1		
Send completed statem	nents to: The Ken 22 Mill Frankfor	ntucky Legislati Creek Park rt, Kentucky 4(02) 573-2929	ve Ethics Comm	nission

If you have questions please call us at (502) 573-2863.